

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **N29555** (2)

1. Corporation Name

**IMPERIAL LAKES ESTATES, UNIT III, CONDOMINIUM AS
SOCIATION, INC.**

400001551254
-08/01/95--01108--023
****130.00 ****130.00

DO NOT WRITE IN THIS SPACE

Principal Place of Business Mailing Address
**C/O ANCHOR PROPERTY MANAGEMENT
2177 SOUTH DALE MABRY
TAMPA FL 34221** **5519- HANLEY RD
2177 SOUTH DALE MABRY
TAMPA FL 34221
US**

3. Date Incorporated or Qualified **12/05/1988** 3a. Date of Last Report **04/14/1994**
4. FEI Number **59-2373226** Applied For Not Applicable

2. Principal Place of Business 2a. Mailing Address
21 26
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 27
City & State City & State
23 28
Zip Country Zip Country
24 25 29 30

5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status \$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**ANCHOR PROPERTY MANAGEMENT
5519-B HANLEY RD
TAMPA FL 33624**

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reconstituting) DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE NAME STREET ADDRESS CITY - ST - ZIP
1. DP GAZAW, THERESA 8501 COUNTESS AVE. CIR PALMETTO FL
2. D KANDT, WALTER 8517 COUNTESS AVE. CIR PALMETTO FL
3. SD LYHNE, BARBARA 8507 COUNTESS AVE. CIR PALMETTO FL

1.1 TITLE NAME STREET ADDRESS CITY - ST - ZIP
1.1 DP CLAIRES ROUSSEAU 8518 Countless Ave. Cir Palmetto FL 34221 Change Addition
2.1 TITLE NAME STREET ADDRESS CITY - ST - ZIP
2.1 DS WINNIE Rusch 8519 Countless Ave. Cir Palmetto FL 34221 Change Addition
3.1 TITLE NAME STREET ADDRESS CITY - ST - ZIP
3.1 DI Paul Cormier 8542 Countless Ave. Cir Palmetto, FL 43221 Change Addition

REMITTED BY MAY 1

5/1/95 M8

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 817, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: CLAIRE S. ROUSSEAU 4/20/95 813-729-7499
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Date) (Telephone Number)